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ENCLOSURES (check all that apply)

Request for Corrected Filing

Drawing(s) (8 sheets)

TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Fee Transmittal Form

Fee Attached

-	are required to respond to a conection of miornation diffess it displays a valid OMB control number.						
	Application Number	09/506,079					
	Filing Date	February 16, 2000					
	First Named Inventor	Clinton					
	Group Art Unit	1642					
	Examiner Name	Anne L. Holleran					
	Attorney Docket No.	49321-16					

Amendment/Response	Receipt	After Allowance									
After Final	Licensing-related Papers	Communication to Group									
Affidavits/declaration(s)	Petition for Extension	Appeal Communication to									
Extension of Time Request	Petition to Convert to a	Board of Appeals and									
Express Abandonment	Provisional Application	Interferences									
Request	Power of Attorney,	Appeal Communication to									
	Revocation, Change of Correspondence Address	Group (Appeal Notice, Brief, Reply Brief)									
Statement; Form PTO-1449	Declaration	Proprietary Information									
Cited References	1 🖯										
Certified Copy of Priority	Statement under 37 CFR 3.73(b)	Status Letter									
Document(s)	Terminal Disclaimer	Return Receipt Postcard Additional Enclosure(s)									
Response to Missing Parts	Small Entity Statement	Additional Enclosure(s) (please identify below):									
under 37 C.F.R. 1.52 or 1.53	Request for Refund	Request For RCE Transmittal									
Response to Missing	Request for Refund										
Parts/Incomplete Application		Appendix for Response and Amendment comprising four									
		items: A) Affidavit; B) Example									
		11; C) PNAS 96:10869-74,									
}		1999; D) Sequence Listing with									
		Sequence Statement and CRF									
		of Sequence Listing on two									
Barrada		diskettes									
Remarks											
SIGNATUE	RE OF APPLICANT, ATTORNEY,	OR AGENT									
	ison, Ph.D., J.D.										
		22504									
Signature	Sans 7 ///	PATENT TRADEMARK OFFICE									
Signature	and I will										
Date April 21, 200	4/										
CERTIFICATE OF TRANSMISSION/MAILING											
I hereby certify that this correspond	ondence is being facsimile transmit	ted to the USPTO or deposited									
with the United States Postal Se	rvice with sufficient postage as Exp	press mail in an envelope									
addressed to: Commissioner to	r Patents, Washington, D.C. 20231	on the date specified below.									
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Signature	by Bulen	Date: April 21, 2004									
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PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
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ADDED

ON TO SERVICE OF THE PROPERTY OF THE P

	Complete if Known				
FEE TRANSMITTAL	Application Number	09/506,079			
· — · · · · · · · · · · · · · · · · · ·	Filing Date	February 16, 2000			
for FY 2004	First Named Inventor	Clinton			
Effective 10/01/2003. Patent fees are subject to annual revision.	Examiner Name	Anne L. Holleran			
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1642			
TOTAL AMOUNT OF PAYMENT (\$) 860	Attorney Docket No.	49321-16			

METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued)													
								3. ADDITIONAL FEES					
							Large			<u>all</u>		_	
Deposit Account:						Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid		
	Deposit Account	04-02	50				1051	130	2051	65	Surcharge - late filing fee or oath		
١	lumber	04-02					1052	50	2052	25	-		
Deposit Account Davis Wright Tremaine LLP								130	1053	130	Non-English specification		
Name							1812	2,520	1812	2,520	For filing a request for ex parte reexamination		
The Commissioner is authorized to: (check all that apply) Charge fee(s) indicated below X Credit any overpayments							1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) during the pendency of this application								1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
							1251	110	2251	55	Extension for reply within first month		
Charge fee(s) indicated below, except for the filing fee								420	2252	210	Extension for reply within second		
Charge any deficiencies										475	month Extension for reply within third month	475	
to the at	ove-identi	fied deposit a					1253 1254	950 1,480	2253 2254	740	• •	475	
		FEE CALC	CULATION		_	1254	1,400	2254	740	month			
	SIC FILIN						1255	2,010	2255	1005			
Large E	Entity	Small Entity	<i>'</i>				1401	330	2401	165	Notice of Appeal		
Fee Code	Fee(\$)	Fee Code Fe	ee(\$)	Fee Descrip	otion	Fee Paid	1402	330	2402		Filing a brief in support of an appeal		
1001	770	2001	385	Utility filing f			1403	290	2403	145			
1002	340	2002	170	Design filing	fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding		
1003 1004	530 770	2003 2004	265 385	Plant filing for Reissue filin		 	1452	110	2452	55			
1004	160	2004	80	Provisional i	•		1453	1,330	2453	665			
fee			1501	1,330	2501		Utility issue fee (or reissue)						
SUBTOTAL (1) (\$)385					1502	480	2502	240	9				
2. EXTRA CLAIM FEES					1503	640	2503	320		<u> </u>			
2. <u>EXI</u>	RA CLAII	M LEES			Fee		1460	130	1460	130	Petitions to the Commissioner Petitions related to provisional	\vdash	
				Extra	from	Fee	1807	50	1807	50	applications		
Total			20** =	Claims	below x	Paid	1806	180	1806	180	Stmt		
Claims Independ	dent		3** =		× [8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
Claims Multiple			J -	·	`		1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))		
Depende		0	494		L	=	1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))		
Large Fee	Entity Fee	Small En	•				1801	770	2801	385	Request for Continued Examination		
Code	(\$)	Code	Fee (\$)	_	ription		1802	900	1802	900	(RCE) Request for expedited examination of a	 	
1202	18		9		excess of 2						design application		
1201 1203	86 290		43 145			n excess of 3	Other fee	e (specify	/)				
** Reissue independent claims over													
							aid SUBTOTAL (3) (\$)4	75					
1205	18	2205	9		ie claims in riginal pater	excess of 20 and at							
SUBTOTAL (2) (\$)0													
or nur	nber previo	usly paid, if g		Reissues, see									

SUBMITTED BY	(Complete (if applicable))				
Name (Print Type)	Barry L. Davison, Ph.D., J.D.	Registration No. (Attorney/Agent)	47,309	Telepho	ne 206-628-7621
Signature	Jan 2 Mar			Date	April 21, 2004

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This collection of information is required by 37 CPR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14.